

STARK, ROCKEFELLER PROPOSE REAL REFORM TO STRENGTHEN MEDICARE

Wednesday, 04 June 2003

Stark and Rockefeller Introduce the Medicare Chronic Care Improvement Act

WASHINGTON,

DC — Today, Rep. Pete Stark (D-CA), Ranking Member of the Ways and Means Health Subcommittee, joined with Senator Jay Rockefeller (D-WV) to introduce the Medicare Chronic Care Improvement Act of 2003. The legislation would expand seniors' access to preventive medical care and wellness services and provide coverage for chronic care coordination and assessment services.

"This legislation would strengthen Medicare in the truest sense, by improving the quality of care delivered to seniors and those with disabilities," Rep. Stark said. "It would improve Medicare for beneficiaries and taxpayers by helping to prevent needless suffering and costly hospitalizations."

Nearly

90% of Americans aged 65 and older suffer from at least one chronic medical condition while two thirds suffer from two or more. Among Medicare beneficiaries, 20% suffer from 5 or more chronic medical conditions, accounting for an astonishing 66% of program spending. On average, Medicare beneficiaries with chronic conditions see eight different physicians regularly.

"Treating serious and disabling chronic conditions is the highest costing and fastest growing segment of health care," Rockefeller said. "This bill provides the right tools for Medicare to take better care of seniors and more effectively manage chronic diseases."

The bill

introduced by Stark and Rockefeller builds on the recommendations made earlier this year by the National Academy of Social Insurance (NASI) Study Panel on Medicare and Chronic Care in the 21st Century. The panel concluded that, "Medicare has the potential to refocus its Medicare program — as well as the nation's health care system — and should take a leading role in improving chronic care."

The Medicare

Chronic Care Improvement Act would follow through on this expert recommendation. This bill provides the Medicare improvements that seniors and people with disabilities need by:

- Improving access to preventive and wellness services;
- Expanding coverage for care coordination and assessment services for Medicare beneficiaries with chronic conditions;
- Implementing a chronic care Quality Improvement Program;
- Providing federal matching grants for clinical information technology systems that improve the coordination and quality of chronic care;
- Ensuring that Medicare beneficiaries are not inappropriately denied coverage for services that are necessary to maintain health or functional status;
- Commissioning an Institute of Medicine study and report on additional ways to ensure effective chronic care.

The Medicare Chronic Care Improvement Act is supported by over 50 health organizations representing consumers and providers, including the Alzheimer's Association, the American Geriatrics Society, the Center for Medicare Advocacy, Families USA, the Medicare Rights Center, and the National Chronic Care Consortium.

According to Ron Pollack, Executive Director of Families USA, "The Medicare Chronic Care Improvement Act is particularly important during the current debate on Medicare. It shows how integrated, coordinated care can be provided to beneficiaries outside of managed care plans. The facts are that the academic literature finds that HMOs are worse for the quality of care of the frail elderly and those with multiple chronic conditions. Forcing seniors into for-profit private plans that make money by denying care is not the way to improve Medicare," said Pollack.

"The Medicare Chronic Care Improvement Act enjoys wide support because it strengthens Medicare for all beneficiaries, whether they are in traditional Medicare or private plans that contract with Medicare," Stark concluded. "Unlike the President's Medicare scheme or that of Congressional Republicans, the Medicare Chronic Care Improve Act would never force elderly and disabled Americans to give up traditional Medicare in order to get crucial benefits. They will never be forced to choose between the doctors they know and trust and the coverage they need. Those are not real choices and they will not improve the quality of care America's seniors need and deserve."